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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b)

Attorney Docket No.: 2003_1039A

First Named Inventor : Tetsuya MATSUTANI

Title: CONTACT HOLE FORMATION METHOD

Express Mail Label No.:

PTO
06/06/03
U.S. 630681
07/31/03

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or computer program <i>(Appendix)</i>
2. <input type="checkbox"/> Small Entity Status is hereby asserted.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i>	<input type="checkbox"/> Computer Readable Form
<ul style="list-style-type: none"> v - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Sequence Listing, a table, or a computer program listing appendix. - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 	<input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper <input type="checkbox"/> The paper and computer readable copies are identical
4. <input checked="" type="checkbox"/> Drawing(s) <i>(35 USC 113)</i>	<input type="checkbox"/> Total Pages: 33
5. <input checked="" type="checkbox"/> Oath or Declaration	<input type="checkbox"/> Total Sheets: 6
a.1. <input checked="" type="checkbox"/> Newly executed (original or copy)	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
a.2. <input type="checkbox"/> Unexecuted	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i>	<input type="checkbox"/> Power of Attorney
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
6. <input type="checkbox"/> Application Data Sheet (see 37 CFR 1.76)	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below, and in a preliminary amendment, or in an Application Data Sheet :

Continuation Divisional Continuation-in-part (CIP) of prior application No.

Prior Application Information: Examiner Group Art Unit

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference therein. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

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July 31, 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of : THE COMMISSIONER IS AUTHORIZED
Tetsuya MATSUTANI : TO CHARGE ANY DEFICIENCY IN THE
FEES FOR THIS PAPER TO DEPOSIT
ACCOUNT NO. 23-0975

Serial No. NEW : Attn: APPLICATION BRANCH

Filed July 31, 2003 : Attorney Docket No. 2003_1039A

CONTACT HOLE FORMATION METHOD

PATENT OFFICE FEE TRANSMITTAL FORM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Attached hereto is a check in the amount of \$1,042.00 to cover Patent Office fees relating to filing the following attached papers:

New application \$750.00

Assignment for Recordal \$ 40.00

Additional Claims Fee:

Excess of Twenty \$

Independent \$252.00

Multiple Dependent Fee \$

A duplicate copy of this paper is being submitted for use in the Accounting Division, Office of Finance.

The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975, with the EXCEPTION of deficiencies in fees for multiple dependent claims in new applications.

Respectfully submitted,

Tetsuya MATSUTANI

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